

Please type a plus sign (+) inside this box [+]

PTO 21 (12-97)

Approved for use through 9/30/00. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

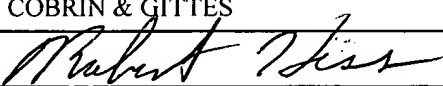
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/733,492	RECEIVED
	Filing Date	December 8, 2000	
	First Named Inventor	Mo-Han FONG	JAN 23 2002
	Group Art Number	2681	Technology Center 2600
	Examiner's Name	To be assigned	
Total Number of Pages in this Submission []	Attorney Docket Number	NTL-3.2.170/3654	

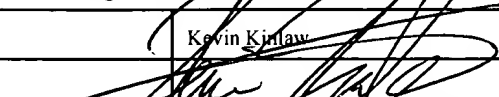
ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form - Duplicate	<input type="checkbox"/> Assignment Papers <i>(for an application)</i>	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached - Check	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation-Change of Correspondence Address	<input type="checkbox"/> Additional Enclosure(s) <i>(Please identify below):</i>
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	1. Return Receipt Postcard
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input checked="" type="checkbox"/> Form PTO-1449 & 3 citations	<input type="checkbox"/> Request for Refund	
<input checked="" type="checkbox"/> Copy of International Search Report	[REMARKS]	
<input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Robert J. Hess (USPTO Reg 32,139) COBRIN & GITTES
Signature	
Date	October 26, 2001

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: BOX DD, NO FEE - Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: [October 26, 2001]	
Typed or printed name	Kevin Kirlaw
Signature	
[Date]: October 26, 2001	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SENT FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, D.C. 20231.